2 10000058648

(Requestor's Name)				
(Address)				
(Address)				
·				
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
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K. SALY EXAMINER MAR 3 2011

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 107 WEST FIRST LL (Name of Limited Lial	bility Company)
The enclosed member, managing member or managiling.	ger resignation and fee(s) are submitted for
Please return all correspondence concerning this ma	atter to:
THEODORE CRANIAS (Contact Person)	
107 WEST FIRST LLC (Firm/Company)	
107 W. IST STREET (Address)	
SANFORD, FL 32771 (City/State and Zip Code)	
For further information concerning this matter, plea	ase call:
THEODORE CRANIAS at (L. (Name of Contact Person)	rea Code & Daytime Telephone Number)
Enclosed please find a check made payable to the F \$25 Filing Fee	Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

1. The name of the li	imited liability company as it	appears on the records of the Florida Department
of State is:	107 WEST FIRST	TLLC
2. This limited liabil	lity company was organized u	under the laws of
FLOR		
	1071	 ·
	-	his limited liability company is:
L1000005	58648	·
4. I, THEODORE	CRANIAS	, hereby resign as a
of this limited liabi resignation in writi		limited liability company has been notified of my
		\rightarrow
	(/	
Signature of Resig	ning Member, Managing Me	mber or Manager
D'11: D	407.00 (D	
	\$25.00 (Required) \$30.00 (Optional)	
Serunea Copy.	550.00 (Optional)	